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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/EP00/11717 11/24/2000

OK AS

**** FOREIGN APPLICATIONS *******

GERMANY 199 62 851.3 12/24/1999

OK AS.

**** SMALL ENTITY ****

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature AS	Initials		

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TITLE

Foot prosthesis

FILING FEE RECEIVED 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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